IN PATIENT SUMMARY BILL

UHID : MMH202481866 Bill No : MMH/MH/IP202402091

IP No : IP2024002154 Bill Date : 29/09/2024

Patient name : Mr.HARIHARA SUBRAMANIAN DOA : 26/9/2024 8:56PM

Age : 27 Y 11 M 7 D/Male DOD

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.VIJAYAN.J

S.No	Description			Amount
1	ADMINISTRATION CHARGES		₹	350.00
2	BED CHARGES		₹	12,600.00
3	DUTY MEDICAL OFFICER CHARGE		₹	2,250.00
4	INJECTION CHARGES		₹	200.00
5	LABORATORY		₹	8,041.00
6	NURSING CHARGE		₹	2,400.00
7	OPERATION THEATRE CHARGES		₹	11,050.00
8	PROCEDURE CHARGES		₹	450.00
9	PROFESSIONAL TEAM FEES		₹	46,000.00
10	RADIOLOGY		₹	1,000.00
		Gross Amount	₹	84,341.00
		Net Payable	₹	84,341.00
		Advance Amount	₹	80,000.00
		Received Amount	₹	4,341.00

Received Amount in Words : Eighty-Four Thousand Three Hundred Forty-One Only SATHISH KUMAR.S

Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	9/26/2024	MMH/MH/RECH202403774	UPI	Advance Amount	5,000.00
2	9/29/2024	MMH/MH/REDH202421420	UPI	Collected Amount	4,341.00
3	9/28/2024	MMH/MH/RECH202403800	CARD	Advance Amount	75,000.00